Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Ident	ify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full i	name		
	your gover picture ide	name that is on rnment-issued ntification (for your driver's	Charles First name	First name
	license or	passport).	Middle name	Middle name
	Bring your identification meeting w	picture on to your ith the trustee.	McMichael Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other i	names you have le last 8 years		
	Include yo maiden na	ur married or mes.		
3.	your Soci number o Individual	ast 4 digits of al Security r federal Taxpayer tion number	xxx-xx-9588	

Del	otor 1 Charles McMichae		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		365 Essex Street 3rd floor Brooklyn, NY 11208				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kings County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Charles McMichael			Case number (if known)				
Par	t 2: Tell the Court About	our Bankr	uptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Chapte	er 7				
		☐ Chapte	er 11				
		☐ Chapte	er 12				
		■ Chapte	er 13				
8.	How you will pay the fee	abo orde	ut how yo er. If your	ou may pay. Typically,	if you are paying the fee y	ck with the clerk's office in your local court for more detail ourself, you may pay with cash, cashier's check, or mone half, your attorney may pay with a credit card or check with	Эу
				y the fee in installme ee in Installments (Offic		on, sign and attach the Application for Individuals to Pay	
		☐ I red	quest tha	at my fee be waived (You may request this optic	on only if you are filing for Chapter 7. By law, a judge may	
						our income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou	
						icial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ No.	Go to I	line 12.			
	residence?	■ No.	Has ve	our landlord obtained :	an eviction judgment agains	st vou?	
		□ res.		No. Go to line 12.	an eviduen jaaginent again	. , ,	
					atomont About an Eviction	Judgment Against You (Form 101A) and file it as part of	
				this bankruptcy petiti		Sudyment Agamst Tou (Form TOTA) and the it as part of	

Deb	tor 1	Charles McMichae	el			Case number (if known)		
Part	t 3 :	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor		
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to	Part 4.			
			☐ Yes. Name and location of business					
	busin an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.			e of business, if any			
	sole p	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, State & ZIP Code				
	it to th	nis petition.				x to describe your business:		
						ness (as defined in 11 U.S.C. § 101(27A))		
					•	Estate (as defined in 11 U.S.C. § 101(51B))		
					•	efined in 11 U.S.C. § 101(53A))		
					•	er (as defined in 11 U.S.C. § 101(6))		
					None of the above			
13.	Chapter 11 of the deadlines.			s. If you ir s, cash-fl	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure		
		definition of small	■ No.	I am r	not filing under Chap	oter 11.		
		ess debtor, see 11 C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
				I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4:	Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do y	ou own or have any	■ No.					
		erty that poses or is	_					
	of im	ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?				diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?			
	- g	<i>(</i>				Number, Street, City, State & Zip Code		

Debtor 1 Charles McMichael Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Charles McMichae	el		Case number (i	f known)			
Par	t 6: Answer These Quest	ions for Rep	orting Purposes					
	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) individual primarily for a personal, family, or household purpose."					
			No. Go to line 16b.					
			Yes. Go to line 17.					
			re your debts primarily busine noney for a business or investme					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	tate the type of debts you owe th	at are not consumer debts or business of	debts			
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will] No					
	be available for] Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	1 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000			
		□ 100-199 □ 200-999		☐ 10,001-25,000				
19.	How much do you	□ \$0 - \$50		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	\$50,001	- \$100,000 1 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			1 - \$500,000 1 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
document, I have obtained				y or agree to pay someone who is not a ce required by 11 U.S.C. § 342(b).	n attorney to help me fill out this			
			lief in accordance with the chapte	er of title 11, United States Code, specific	ed in this petition.			
I understand making a false statement, concealing bankruptcy case can result in fines up to \$250,00 and 3571.								
		/s/ Charle Charles N	s McMichael IcMichael	Signature of Debtor 2				
		Signature o		2.g 01 200101 2				
		Executed or		Executed on				
			MM / DD / YYYY	MM / E	DD / YYYY			

Debtor 1 Charles McMicha	el	Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	d States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	y and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the inform					
. 0	/s/ Hanin R. Shadood	Date	August 21, 2019			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Hanin R. Shadood 5489596 Printed name					
	Aronow Law, PC					
	Firm name					
	20 Crossways Park Drive North					
	Suite 210					
	Woodbury, NY 11797					
	Number, Street, City, State & ZIP Code					
	Contact phone 516-762-6700	Email address	Hanin.S@AronowLaw.com			
	5489596 NY					
	Bar number & State					

Fill	in this inform	ation to identify your	case:				
Deb	otor 1	Charles McMicha	-	LastNama			
1 -	otor 2	First Name	Middle Name	Last Name			
` '	use if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Bar	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
	se number					_	if this is an ded filing
		m 106Sum					
				nd Certain Statistica le are filing together, both are			12/15
info	rmation. Fill o	ut all of your schedule	es first; then complete t	the information on this form. I	If you are filing amend		
Par	t 1: Summa	arize Your Assets					
						Your as Value o	ssets If what you own
1.	Schedule A	B: Property (Official Fo	orm 106A/B) om Schedule A/B			\$	716,884.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B			\$	32,500.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B			\$	749,384.00
Par	t 2: Summa	rize Your Liabilities					
							abilities t you owe
2.			aims Secured by Propert nn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of I	Part 1 of Schedule D	\$	702,788.00
3.			Unsecured Claims (Offici 1 (priority unsecured clain	al Form 106E/F) ms) from line 6e of <i>Schedule E/</i>	/F	\$	3,000.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule	e E/F	\$	0.00
					Your total liabilities	\$	705,788.00
					rour total nabilities	Ψ	703,786.00
Par	t 3: Summa	arize Your Income and	Expenses				
4.		Your Income (Official Fo		le I		\$	8,120.39
5.		Your Expenses (Official onthly expenses from li				\$	2,780.00
Par	t 4: Answe	These Questions for	Administrative and Sta	tistical Records			
6.	-	• • •	er Chapters 7, 11, or 13' on this part of the form. (? Check this box and submit this f	form to the court with yo	ur other sch	nedules.
7.	YesWhat kind o	f debt do you have?					
				r debts are those "incurred by ar .9g for statistical purposes. 28 U		a personal,	family, or
		ebts are not primarily of the state of the s		ave nothing to report on this par	t of the form. Check this	s <i>box</i> and su	ubmit this form to
~							

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Charles McMichael

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,356.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Dark 4 on Schodule E/F complete fellowing.	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,000.00

Fill	n this inform	ation to identify	your case and th	is filing:				
Deb	tor 1	Charles McN	lichael					
		First Name	Middle	Name Last	Name	_		
	tor 2 ise, if filing)	First Name	Middle	Name Last	Name			
Unit	eu States Dan	Krupicy Court for	the: EASTERN	DISTRICT OF NEW YORK	•			
Cas	e number						☐ Check if this is an amended filing	
Off	icial For	<u>m 106A/B</u>	<u> </u> -					
Sc	hedule	A/B: Pr	operty				12/15	
nforr Answ	nation. If more er every questi	space is needed, a on.	attach a separate sh		iling together, both are equal of any additional pages, write dave an Interest In			
. D c	you own or ha	ive any legal or eq	uitable interest in a	ny residence, building, land,	or similar property?			
	No. Go to Part	2.						
	Yes. Where is	the property?						
1.1	365 Essex Street address, if	Street available, or other des	cription	What is the property? Che Single-family home Duplex or multi-unit Condominium or coo	amount of any secured	luct secured claims or exemptions. Put t of any secured claims on <i>Schedule D:</i> Who Have Claims Secured by Property.		
				☐ Manufactured or mo	hilo homo			
	Brooklyn	NY	11208-0000	☐ Land	Cur	rent value of the	Current value of the portion you own?	
	City	State	ZIP Code	☐ Investment property	ent	ire property? \$716,884.00	\$716.884.00	
	- ,			☐ Timeshare	Dor	· · · · · · · · · · · · · · · · · · ·	our ownership interest	
				Other	(su	ch as fee simple, tena	ancy by the entireties, or	
				Who has an interest in the	property: Check one	e estate), if known.		
	Kings			Debtor 1 only	<u>ге</u>	e simple		
	Kings County			☐ Debtor 2 only ☐ Debtor 1 and Debtor	0 1			
	,			Debtor 1 and Debtor At least one of the d	·	Check if this is com (see instructions)	munity property	
				711 10401 0110 01 1110 4	sh to add about this item, suc	,		
				Value by www.zillow				
				•				
_	ماط 4 امام مامالاه			all of your entries from I				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt	tor 1 C	harles McMich	ael		Case number (if known)	
3. C a	ars, vans,	trucks, tractors	, sport utility ve	hicles, motorcycles		
П	No					
_	Yes					
	. 00					
3.1	Make:	Chrysler		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	300		■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2011		Debtor 2 only	Current value of	the Current value of the
		mate mileage:	8,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation: by www.nada.c	com	At least one of the debtors and another		
	Value	by www.iiaua.	Join	☐ Check if this is community property (see instructions)	\$12,500	\$12,500.00
Ex				d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		
				n for all of your entries from Part 2, including that number here		\$12,500.00
Part :	3: Descri	be Your Personal a	and Household Ite	ems		
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E				, china, kitchenware		
				d goods 1 couch, 2 chairs, 1 coffee table room set, 4 bedroom sets and assorted		
		ki	tchenware.	ssex Street 3rd floor, Brooklyn NY 1120		\$3,500.00
<i>E</i>		Televisions and raincluding cell phoescribe	nes, cameras, m			
		Lo	ocation: 365 E	ssex Street 3rd floor, Brooklyn NY 1120	8	\$800.00
E		s of value Antiques and figu other collections,		prints, or other artwork; books, pictures, or other lectibles	art objects; stamp, coin,	or baseball card collections;
	l Yes. De	scribe				
E	xamples:	musical instrume	hic, exercise, an	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
Ш	Yes. De	scribe				

De	ebtor 1	Charles McM	lichael	Case number	(if known)
10.	Firearn Examp		, shotguns, ammunition, and relat	ed equipment	
	■ No □ Yes.	Describe			
11.	Clothe Examp		othes, furs, leather coats, designer	r wear, shoes, accessories	
	Yes.	Describe			
			Used miscellaneous clothic Location: 365 Essex Street	ng. : 3rd floor, Brooklyn NY 11208	\$350.00
12.	□ No		velry, costume jewelry, engageme	ent rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
			Used watch and wedding b Location: 365 Essex Street	oand. : 3rd floor, Brooklyn NY 11208	\$300.00
14. 15 Do	Examp No Yes. Any ott No Yes. Any ott for Pa	Give specific info the dollar value o art 3. Write that n	ormation of all of your entries from Part 3.		
16.	□ No		nave in your wallet, in your home,	in a safe deposit box, and on hand when you file y	your petition
				Cash	\$50.00
	Examp		avings, or other financial accounts f you have multiple accounts with	; certificates of deposit; shares in credit unions, br the same institution, list each.	rokerage houses, and other similar
	□ No ■ Yes			Institution name:	
			17.1. Checking	Banco Popular Account # 6235	\$15,000.00

Debtor '	Charles McMichael	Case number (if known)
	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with	
■ No		
□ Ye	s Institution or issu	er name:
	t venture	rporated and unincorporated businesses, including an interest in an LLC, partnership, and
	s. Give specific information about them	
□ 16	Name of entity:	% of ownership:
Neg Nor	-negotiable instruments are those you cannot	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.
■ No		
⊔ Y€	s. Give specific information about them Issuer name:	
21. Reti <i>Exa</i> □ No), 403(b), thrift savings accounts, or other pension or profit-sharing plans
■ Ye	s. List each account separately. Type of account:	Institution name:
	Pension	Pension 32BJ \$0.00
	mples: Agreements with landlords, prepaid rea	so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications companies, or others
	s	Institution name or individual:
23. Ann		oney to you, either for life or for a number of years)
	s Issuer name and description	
	S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition program.
		tion. Separately file the records of any interests.11 U.S.C. § 521(c):
■ No		(other than anything listed in line 1), and rights or powers exercisable for your benefit
∐ Ye	s. Give specific information about them	
	•	and other intellectual property ceeds from royalties and licensing agreements
□ Ye	s. Give specific information about them	
		ibles poperative association holdings, liquor licenses, professional licenses
□ Ye	s. Give specific information about them	
Money	or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.

De	btor 1	Charles McMichael	Case number (if known)	
28.	Tax ref	unds owed to you		
	■ No			
	☐ Yes.	Give specific information about them, including w	hether you already filed the returns and the tax years	
29.		support		
	Examp ■ No	oles: Past due or lump sum alimony, spousal supp	port, child support, maintenance, divorce settlement, property	settlement
		Give specific information		
		·		
30.		amounts someone owes you		
	Examp	bles: Unpaid wages, disability insurance payments benefits; unpaid loans you made to someone	s, disability benefits, sick pay, vacation pay, workers' comper	nsation, Social Security
	■ No	benefits, unpaid loans you made to someone	c disc	
	☐ Yes.	Give specific information		
31.	Interes	ts in insurance policies		
	Examp		vings account (HSA); credit, homeowner's, or renter's insurar	nce
	■ No			
	⊔ Yes.	Name the insurance company of each policy and Company name:	l list its value. Beneficiary:	Surrender or refund
		, ,	•	value:
32.		terest in property that is due you from someon		
	•	are the beneficiary of a living trust, expect proceed one has died.	ds from a life insurance policy, or are currently entitled to rece	eive property because
	■ No			
	☐ Yes.	Give specific information		
33.		against third parties, whether or not you have bles: Accidents, employment disputes, insurance of	e filed a lawsuit or made a demand for payment claims, or rights to sue	
	■ No		, i. , i. , j. , i. , i. , i.	
	☐ Yes.	Describe each claim		
34.	Other o	contingent and unliquidated claims of every na	ature, including counterclaims of the debtor and rights to	set off claims
	■ No			
	☐ Yes.	Describe each claim		
35.	Any fin	ancial assets you did not already list		
	■ No			
	☐ Yes.	Give specific information		
36	. Add t	he dollar value of all of your entries from Part	4, including any entries for pages you have attached	
		art 4. Write that number here		\$15,050.00
Do	-4 Ex Do	and he Amy Business Beleted Branarty Voy Own or U	Jane on Intercet In List any real extets in Bort 4	
Pa	rt 5: Des	scribe Any Business-Related Property You Own or H	nave an interest in. List any real estate in Part 1.	
_	_ ´	own or have any legal or equitable interest in any bu	siness-related property?	
		o to Part 6. So to line 38.		
٠	⊒ 165. €	outonine so.		
_	_			
Pa		scribe Any Farm- and Commercial Fishing-Related P ou own or have an interest in farmland, list it in Part 1.	Property You Own or Have an Interest In.	
16	Deve	own or have any local or occitable interest in	any farm, or commercial fiching related presents?	
46.		i own or have any legal or equitable interest in Go to Part 7.	n any farm- or commercial fishing-related property?	
	_	. Go to line 47.		
	103.			
Pa	rt 7:	Describe All Property You Own or Have an Interest	it in That You Did Not List Above	

Official Form 106A/B

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Deb	tor 1 Charles McMichael		Case number (if known)	
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$716,884.00
56.	Part 2: Total vehicles, line 5	\$12,500.00		
57.	Part 3: Total personal and household items, line 15	\$4,950.00		
58.	Part 4: Total financial assets, line 36	\$15,050.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$32,500.00	Copy personal property total	\$32,500.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$749,384.00

					•
Fill in this	information to identify your case:				
Debtor 1	Charles McMichael				
Dobtor 2	First Name	Middle Name	L	Last Name	
Debtor 2 (Spouse if, filing)	g) First Name	Middle Name	L	ast Name	
United Stat	es Bankruptcy Court for the: EAS	TERN DISTRICT OF N	EW Y	ORK	
Case numb	per				
(if known)					☐ Check if this is an amended filing
Official	Form 106C				
	dule C: The Prope	erty You Cla	im	as Exempt	4/19
the property needed, fill case numbe	you listed on Schedule A/B: Propert out and attach to this page as many or or (if known).	y (Official Form 106A/B) copies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
specific do any applica funds—ma exemption	y be unlimitéd in dollar amount. Ho	ly, you may claim the fons—such as those for owever, if you claim an	ull fa heal exer	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Part 1:	dentify the Property You Claim as	Exempt			
1. Which	set of exemptions are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.	
■ You	are claiming state and federal nonba	inkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
☐ You	are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2. For an	y property you list on Schedule A/	B that you claim as exe	empt.	fill in the information below.	
	scription of the property and line on	Current value of the	•	ount of the exemption you claim	Specific laws that allow exemption
Schedu	le A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ssex Street Brooklyn, NY 11208	\$716,884.00	•	\$14,096.00	NYCPLR § 5206
Value	County by www.zillow.com om Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	Chrysler 300 8,000 miles by www.nada.com	\$12,500.00		\$4,550.00	Debtor & Creditor Law §
	om Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	282(1)
	household goods 1 couch, 2 , 1 coffee table, 2 end tables, 1	\$3,500.00		\$3,500.00	NYCPLR § 5205(a)(5)
dining assor Locat Brook	room set, 4 bedroom sets and ted kitchenware. ion: 365 Essex Street 3rd floor, lyn NY 11208 im Schedule A/B: 6.1	i		100% of fair market value, up to any applicable statutory limit	
	4 televisions.	\$800.00		\$800.00	NYCPLR § 5205(a)(5)
	on: 365 Essex Street 3rd floor, lyn NY 11208			100% of fair market value, up to	

Official Form 106C

any applicable statutory limit

Line from Schedule A/B: 7.1

De	ebtor 1 Charles McMichael			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Used miscellaneous clothing. Location: 365 Essex Street 3rd floor,	\$350.00		\$350.00	NYCPLR § 5205(a)(5)
	Brooklyn NY 11208 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Used watch and wedding band. Location: 365 Essex Street 3rd floor,	\$300.00		\$300.00	NYCPLR § 5205(a)(6)
	Brooklyn NY 11208 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Pension: Pension 32BJ Line from Schedule A/B: 21.1	\$0.00		\$0.00	Debtor & Creditor Law § 282(2)(e)
	Line IIom Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	202(2)(6)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this informat	ion to identify you	ır case:			
Debtor 1	Charles McMicl	nael			
	First Name	Middle Name Last Nam	9	_	
Debtor 2				_	
(Spouse if, filing)	First Name	Middle Name Last Nam	3		
United States Bankro	uptcy Court for the	EASTERN DISTRICT OF NEW YORK		_	
Case number					
(if known)				☐ Check	if this is an
				amen	ded filing
~	=				
Official Form 1	<u>106D</u>				
Schedule D	: Creditors	Who Have Claims Secu	red by Proper	tv	12/15
		If two married people are filing together, both a out, number the entries, and attach it to this for			
1. Do any creditors hav	ve claims secured b	y your property?			
		his form to the court with your other schedule	s. You have nothing else	to report on this form.	
_	of the information	•	s. Tournavo nouning old	to report on the form.	
		below.			
Part 1: List All S	ecured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separ	ately		
		s a particular claim, list the other creditors in Part 2. ical order according to the creditor's name.	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
			value of collateral.	claim	If any
2.1 Loancare Se	ervicing Ctr	Describe the property that secures the claim:	\$591,938.00	\$716,884.00	\$0.00
Creditor's Name		365 Essex Street Brooklyn, NY			
		11208 Kings County Value by www.zillow.com			
		As of the date you file, the claim is: Check all the	 at		
3637 Sentara	•	apply.			
	ch, VA 23452	Contingent			
Number, Street, City	y, State & Zip Code	Unliquidated			
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage of	r secured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the c	lebtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim community debt	relates to a	Other (including a right to offset)	ortgage		
	Opened				
	04/07 Last				
	Active				
Date deht was incurre	d 4/04/16	Last 4 digits of account number 51	58		

Official Form 106D

Debtor 1 Charles McMichael		Case number (if known)		
First Name Middle N	ame Last Name			
2.2 Wells Fargo Hm Mortgag	Describe the property that secures the claim:	\$110,850.00	\$716,884.00	\$0.00
Creditor's Name	365 Essex Street Brooklyn, NY			
	11208 Kings County			
	Value by www.zillow.com			
Po Box 10335	As of the date you file, the claim is: Check all that apply.			
Des Moines, IA 50306	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt		Mortgage		
Opened 04/07 Last Active Date debt was incurred 7/12/19	Last 4 digits of account number 256	7		
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$702,788.0	00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$702,788.0		
Write that number here:		\$102,100.0	10	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
Use this page only if you have others to b trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that y we to someone else, list the creditor in Part 1, ar you listed in Part 1, list the additional creditors	d then list the collection agen	cy here. Similarly, if you h	ave more
Name, Number, Street, City, State & 2 Gross Polowy LLC	Zip Code On	which line in Part 1 did you enter	the creditor? 2.1	
1775 Wehrle Drive	Las	4 digits of account number		
suite 100				
Buffalo, NY 14221				

Fill in	this infor	mation to identify your	case:						
Debto	r 1	Charles McMicha	el						
		First Name	Middle Name	e Last Na	ame				
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	e Last Na	ame				
United	d States Ba	ankruptcy Court for the:	EASTERN DIS	STRICT OF NEW YORK					
Case	number								
(if know	_								if this is an
								amend	ed filing
Offic	ial Forr	m 106E/F							
Sch	edule E	E/F: Creditors W	ho Have U	Insecured Clair	ns				12/15
Schedu Schedu left. Att	ile G: Execu ile D: Credit ach the Cou nd case nu	tracts or unexpired leases utory Contracts and Unexp tors Who Have Claims Sec ntinuation Page to this pag mber (if known).	ired Leases (Offic ured by Property. e. If you have no	ial Form 106G). Do not in If more space is needed, information to report in a	clude any cre copy the Par	editors with partially s t you need, fill it out,	ecured clai	ms that a entries ir	re listed in the boxes on the
		ors have priority unsecure							
	No. Go to F	Part 2.							
	Yes.								
ide po	entify what ty ssible, list th	Ir priority unsecured claims pe of claim it is. If a claim hat ne claims in alphabetical orde than one creditor holds a pa	as both priority and er according to the	nonpriority amounts, list the creditor's name. If you have	at claim here a	and show both priority a	nd nonpriori	ty amount	s. As much as
(Fo	or an explan	nation of each type of claim, s	see the instructions	for this form in the instructi	on booklet.)	Total claim	Priority		Nonpriority
2.1		w Law, P.C.	Last	4 digits of account numb	er 9588	\$3,000.00	amount	\$0.00	\$3,000.00
		reditor's Name ssways Park Drive N 10	Whe	n was the debt incurred?	2019		-		
	Woodb	oury, NY 11797							
v		Street City State Zip Code ed the debt? Check one.		f the date you file, the cla	im is: Check	all that apply			
_	_		_	ontingent					
_	Debtor 1	•	_	nliquidated					
	☐ Debtor 2	•		isputed					
_	_	and Debtor 2 only		of PRIORITY unsecured					
L	J At least o	ne of the debtors and anothe		omestic support obligations					
		this claim is for a commun	•	axes and certain other debt	,	o .			
		subject to offset?		laims for death or personal	injury while yo	ou were intoxicated			
	■ No		Цс	other. Specify					
	☐ Yes			Legal fee					
Part 2	List A	All of Your NONPRIORIT	Y Unsecured C	laims					
3. Do	any credit	ors have nonpriority unsec	cured claims agair	nst you?					
	No. You ha	ave nothing to report in this p	art. Submit this for	m to the court with your other	er schedules.				
	Yes.								
Part 3	List C	Others to Be Notified Ab	out a Debt That	You Already Listed					
is try have	this page or ring to colle more than	nly if you have others to be ect from you for a debt you one creditor for any of the debts in Parts 1 or 2 do no	e notified about yo owe to someone debts that you lis	our bankruptcy, for a debt else, list the original cred sted in Parts 1 or 2, list the	itor in Parts	1 or 2, then list the co	llection age	ency here.	. Similarly, if you

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

Official Form 106 E/F

ebtor 1 Ch	arles N	IcMichael	Case no	umber (if knov	wn)
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,000.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Charles McMicha	iel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u></u>
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Debtor 1	Charles McMicha	el			
	First Name	Middle Name	Last Name		
ebtor 2 Spouse if, filing) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	EASTERN DISTRICT O			
ase numbe	er				
known)				☐ Check if this is amended filing	
	Form 106H				
chedu	ule H: Your Cod	ebtors			12/15
our name a	und case number (if known) bu have any codebtors? (if	. Answer every question		to this page. On the top of any Additional Page	o, WIILE
■ No □ Yes					
	n the last 8 years, have you, California, Idaho, Louisiana			ry? (Community property states and territories incl ington, and Wisconsin.)	ude
■ No. G	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person sure you have listed the creditor on Schedule 1 16G). Use Schedule D, Schedule E/F, or Schedu	D (Officia
_	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe Check all schedules that apply:	the debt
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
Nu Ci	umber Street ity	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street			_	
Ci	ity	State	ZIP Code		

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Fill	in this information to identify y	our case:							
Del	btor 1 Charles	s McMichael			_				
	btor 2				_				
Uni	ited States Bankruptcy Court f	or the: EASTERN DISTRICT	OF NEW YORK		_				
_	se number 						nt show	ing postpetition	
\bigcirc	fficial Form 106l							following date:	
	chedule I: Your	ncome				MM / DD/ Y	YYY		12/15
sup spo atta	plying correct information. I use. If you are separated an	s possible. If two married peo f you are married and not filin d your spouse is not filing wi orm. On the top of any addition	ng jointly, and your the thick the t	spouse is de inform	s living wi	th you, inclu out your spo	ide info use. If r	rmation about nore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non	-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	ob,	☐ Employed			■ Emplo	yed		
		Employment status	■ Not employed			☐ Not er	nployed		
		Occupation				Job opp	ortuni	ty specialist	
	Include part-time, seasonal, self-employed work.	Employer's name				NYC De	partme	ent of Social	Services
	Occupation may include stu or homemaker, if it applies.	dent Employer's address							
		How long employed the	here?				4 years	S	
Pai	rt 2: Give Details Abou	t Monthly Income							
	imate monthly income as of use unless you are separated.	the date you file this form. If y	you have nothing to r	eport for a	any line, wi	ite \$0 in the	space. I	nclude your noi	n-filing
	ou or your non-filing spouse ha e space, attach a separate sh	ve more than one employer, co	ombine the informatio	n for all ei	mployers f	or that person	n on the	lines below. If	you need
					For D	ebtor 1		ebtor 2 or iling spouse	
2.		, salary, and commissions (bothly, calculate what the monthle		2.	\$	0.00	\$	4,449.47	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$_	0.00	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$	4,449.47	

Official Form 106l Schedule I: Your Income page 1

Debto	or 1	Charles McMichael	_	Cas	se number (if known)			
	Cop	y line 4 here	4.	Fo	or Debtor 1		ebtor 2 or iling spouse 4,449.47	
5.	l ist	all payroll deductions:		•				
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Municpal Credit Union	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ + \$	1,100.67 0.00 336.81 0.00 0.00 0.00 0.00 406.60	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	1,844.08	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	2,605.39	
	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$	3,400.00 0.00 0.00 0.00 1,359.00 756.00 0.00	\$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	5,515.00	\$	0.00]
11.	State Included the	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	depen		•	s, and		8,120.39
	Spe	not include any amounts already included in lines 2-10 or amounts that are not cify:					hedule J. 11. +\$	0.00
		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$Combine	
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monuny	income

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:			
Deb	otor 1 Charles McMichael	Cł	neck if this is:	
	otor 2		•	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		MM / DD / YYYY	
	se number			
	known)			
	fficial Form 106J			
	chedule J: Your Expenses			12/15
info	as complete and accurate as possible. If two married people are filing ormation. If more space is needed, attach another sheet to this form. (mber (if known). Answer every question.			
Par	rt 1: Describe Your Household Is this a joint case?			
••	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?			
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Se	parate Household of D	ebtor 2.	
2.	Do you have dependents? ■ No			
		endent's relationship to tor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the dependents names.			□ No □ Yes □ No
				□Yes
				□ No □ Yes
				□ No
0	P			☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?			
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are penses as of a date after the bankruptcy is filed. If this is a supplement plicable date.	using this form as a tal <i>Schedule J</i> , check	supplement in a Cha the box at the top o	apter 13 case to report f the form and fill in the
the	clude expenses paid for with non-cash government assistance if you ke value of such assistance and have included it on Schedule I: Your Infificial Form 106I.)		Your exp	enses
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.	first mortgage 4.	\$	0.00
	If not included in line 4:			
	4a. Real estate taxes	4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance	4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses	4c.	·	20.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equ 	4d. uity loans 5.	\$ \$	0.00 765.00

Debtor 1	Charles McMichael	Case num	ber (if known)	
-				
6. Utilitie 6a.	ss: Electricity, heat, natural gas	6a.	\$	350.00
	Water, sewer, garbage collection	6b.	·	350.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	80.00
	Other. Specify:	6d.	*	0.00
	and housekeeping supplies	6u. 7.	\$	
			·	450.00
	care and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	150.00
	nal care products and services	10.	\$	125.00
	al and dental expenses	11.	\$	175.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	140.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	able contributions and religious donations	14.	·	0.00
5. Insura			* -	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
15c.	Vehicle insurance	15c.	·	75.00
	Other insurance. Specify:	15d.	*	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		T	0.00
Specif		16.	\$	0.00
	ment or lease payments:	170	•	0.00
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as sted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif		19.	· -	
	real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
1. Other:		21.		0.00
			· Ψ	0.00
	late your monthly expenses			
	dd lines 4 through 21.		\$	2,780.00
22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	2,780.00
3. Calcul	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,120.39
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,780.00
220	Subtract your monthly expenses from your monthly income			
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	5,340.39
For exa	u expect an increase or decrease in your expenses within the year after y imple, do you expect to finish paying for your car loan within the year or do you expect you ation to the terms of your mortgage?			or decrease because of a
■ No.	·			
☐ Yes	Explain here:			

Fill in th	is informa	tion to identify your	case:						
Debtor 1		Charles McMichae	el						
		First Name	Middle Name	Las	Name				
Debtor 2 (Spouse if,		First Name	Middle Name	Las	Name				
United S	states Bank	ruptcy Court for the:	EASTERN DISTRICT	OF NEW YOR	RK				
Case nu (if known)	mber						_	Check if this is amended filing	
		106Dec	n Individua	l Debt	or's Schadi	عمار			12/15
years, or	Sign E	J.S.C. §§ 152, 1341, 1 Below	519, and 3571.						
Did	l you pay o	or agree to pay some	one who is NOT an att	orney to help	you fill out bankrupto	cy forms?			
	No								
	Yes. Na	me of person						ion Preparer's ure (Official Fo	
		of perjury, I declare true and correct.	that I have read the su	mmary and s	chedules filed with th	is declaration	on and		
х	/s/ Charle	es McMichael		Х					
-	Charles	McMichael of Debtor 1			Signature of Debtor 2				
	Date Au	gust 21, 2019			Date				

Official Form 106Dec

Fil	l in this informa	ation to identify you	case:						
De	ebtor 1	Charles McMicha	ael						
De	ebtor 2	First Name	Mic	ddle Name	I	Last Name			
	ouse if, filing)	First Name	Mic	idle Name	ı	Last Name			
Un	ited States Banl	kruptcy Court for the:	EASTE	RN DISTRICT OF	NEW Y	ORK			
	nse number							_	neck if this is an nended filing
	fficial For	-	Affair a	for Individ	duale	Eiling for F	2 an krunt	.07	444.6
Be info nur	as complete ar ormation. If mo nber (if known)	of Financial And accurate as possione space is needed, Answer every questable About Your Ma	ble. If two attach a s	married people a eparate sheet to	re filing this for	y together, both are m. On the top of an	e equally resp	onsible for supp	
		etails About Your Ma current marital statu		s and where rou	Liveu	belore			
1.	what is your	current maritai statu	81						
	MarriedNot marri	ed							
2.	During the las	st 3 years, have you	lived anyw	here other than	where y	ou live now?			
	■ No	all of the places you li	ved in the	last 3 years. Do no	ot includ	e where you live no	N		
	Debtor 1 Price		ved in the	Dates Debtor 1	ot inicida	Debtor 2 Prior A			Dates Debtor 2
	Debtor 11110	n Address.		lived there		Debtor 2 i nor A	uui ess.		lived there
3. stat		st 8 years, did you ev s include Arizona, Ca							? (Community property isconsin.)
	■ No								
	☐ Yes. Mak	e sure you fill out Sch	edule H: Y	our Codebtors (Of	ficial Fo	rm 106H).			
Pa	rt 2 Explain	the Sources of You	r Income						
4.	Fill in the total	any income from en amount of income you a joint case and you	received	from all jobs and a	all busin	esses, including part	t-time activities	· S.	dar years?
	□ No ■ Yes. Fill i	n the details.							
			Debtor 1				Debtor 2		
				of income that apply.	(befo	ss income are deductions and asions)	Sources of Check all the		Gross income (before deductions and exclusions)
	-	f current year until for bankruptcy:	☐ Wages bonuses,	s, commissions, tips		\$27,200.00	☐ Wages, bonuses, ti	commissions,	
			■ Opera	ting a business			☐ Operatir	ng a business	

Official Form 107

Debtor 1 C	harles McMi	chael		Case number (if known)				
			5.14		D.14. 0			
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last cale (January 1 to	ndar year: o December 3	1, 2018)	☐ Wages, commissions, bonuses, tips	\$17,500.00	☐ Wages, commissions, bonuses, tips			
			Operating a business		☐ Operating a business			
	ndar year befo o December 3		☐ Wages, commissions, bonuses, tips	\$17,500.00	☐ Wages, commissions, bonuses, tips			
			Operating a business		☐ Operating a business			
and othe winnings List each	r public benefit . If you are filin	payments; g a joint cas e gross inco	pensions; rental income; inte ee and you have income that ome from each source separa		nat you listed in line 4.			
			Debtor 1	0	Debtor 2	0		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
	ry 1 of current I filed for bank		Social Security Benefits	\$10,872.00				
For last cale (January 1 to	ndar year: o December 3	1, 2018)	Social Security Benefits	\$17,436.00				
	ndar year befo o December 3		Social Security Benefits	\$17,436.00				
Part 3: Lis	st Certain Pay	ments You	Made Before You Filed for	Bankruntev				
	er Debtor 1's o	or Debtor 2	's debts primarily consume	er debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an		
	- ~	00 days befo Go to line 7		id you pay any creditor a total	of \$6,825* or more?			
		paid that cre	editor. Do not include paymer	nts for domestic support oblig	n one or more payments and a ations, such as child support a			
			payments to an attorney for t t on 4/01/22 and every 3 year		or after the date of adjustmen	t.		
Yes			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?			
	■ No.	Go to line 7	1					
	□ Yes	List below e include pay	each creditor to whom you pa		I the total amount you paid the port and alimony. Also, do not			

Del	otor 1 Charles McMichael		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pag	yment for
7.	Within 1 year before you filed for bankrupte <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and ar	u are a genera ny managing aq	l partner; corporations gent, including one fo
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		ments or transfer a	ny property on a	ccount of a de	bt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	this payment tor's name
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
	□ No ■ Yes. Fill in the details. Case title Case number CIT v McMichael	Nature of the case Foreclosure	Court or agency Kings County S Ct		Status of the case Pending	
	517628-2016		360 Adams Stro Brooklyn, NY 1		☐ On appea	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, fo	oreclosed, garnis	hed, attached	, seized, or levied? Value of the
	Creditor Name and Address	. ,	_	Date		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.			nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankruptcourt-appointed receiver, a custodian, or a No Yes		erty in the possessi			fit of creditors, a

Deb	otor 1 Charles McMichael	Case number	(if known)						
Par	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankruptcy. ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person′	?					
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No								
	☐ Yes. Fill in the details for each gift or contribu	ution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value					
	Address (Number, Street, City, State and ZIP Code)								
Par	t 6: List Certain Losses								
15.	or gambling? ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any							
	how the loss occurred Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Par	t 7: List Certain Payments or Transfers								
	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you					
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Aronow Law, PC 20 Crossways Park Drive North Suite 210 Woodbury, NY 11797 Hanin.S@AronowLaw.com	Attorney Fees	August 21, 2019	\$2,000.00					
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you like the second		or transfer any prope	rty to anyone who					
	Yes. Fill in the details.								
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					

Debtor 1 Charles McMichael

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you	Description and va		Describe any proper payments received or paid in exchange		as		
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a se	lf-settled trust or simil	ar device of which you are	а		
	Name of trust	Description and va	Description and value of the property transferred					
Par	rt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage							
	houses, pension funds, cooperatives, associaNoYes. Fill in the details.	itions, and other finan	icial institutions.					
		ast 4 digits of account number	Type of account instrument	or Date account closed, sold, moved, or transferred	was Last bala before closing trans	g or		
21.	Do you now have, or did you have within 1 yes cash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit box or oth	her depository for securitie	:S,		
	No Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ar before you filed for	bankruptcy?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?			
Par	rt 9: Identify Property You Hold or Control fo	r Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any property y	you borrowed from, are	e storing for, or hold in trus	st		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		escribe the property	Va	alue		
Par	rt 10: Give Details About Environmental Inform	nation						
For	the purpose of Part 10, the following definition	s apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Charles McMichael

Case number (if known)

	regulations controlling the cleanup of th	ese substances, wastes, or material.					
	to own, operate, or utilize it, including di		, , ,				
	Hazardous material means anything an ohazardous material, pollutant, contamina		s waste, hazardous substance, toxic s	ubstance,			
Rep	oort all notices, releases, and proceedings	that you know about, regardless of whe	en they occurred.				
24.	Has any governmental unit notified you	that you may be liable or potentially liable	e under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit	of any release of hazardous material?					
	No Yes. Fill in the details.						
	Name of site	Governmental unit	Environmental law, if you	Date of notice			
	Address (Number, Street, City, State and ZIP Code			Date of Helios			
26.	6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	No						
	☐ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	rt 11: Give Details About Your Business	or Connections to Any Business					
27.	Within 4 years before you filed for bankr	uptcy, did you own a business or have a	ny of the following connections to any	business?			
	☐ A sole proprietor or self-employe	ed in a trade, profession, or other activity	, either full-time or part-time				
	☐ A member of a limited liability co	empany (LLC) or limited liability partnersl	hip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing	executive of a corporation					
	☐ An owner of at least 5% of the vo	oting or equity securities of a corporation	1				
	No. None of the above applies. Go						
		fill in the details below for each busines	···c				
	Business Name	Describe the nature of the business		•			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security				
28.	Within 2 years before you filed for bankr institutions, creditors, or other parties.	uptcy, did you give a financial statement	Dates business existed to anyone about your business? Inclu	ıde all financial			
	■ No						
	☐ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)						

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor	1 Charles McMi	chael		Case number (if known)
with a l		result in fines up to \$25	se statement, concealing pr 50,000, or imprisonment for	operty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Ch	arles McMichael			
	es McMichael ture of Debtor 1		Signature of Debtor 2	
Date	August 21, 2019		Date	
Did you	ı attach additional p	ages to Your Statement	of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
■ No				
☐ Yes				
Did you	ı pay or agree to pay	someone who is not ar	n attorney to help you fill ou	bankruptcy forms?
No				
☐ Yes.	Name of Person	. Attach the Bankruptc	y Petition Preparer's Notice, L	Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your case:
Debtor 1	Charles McMichael
Debtor 2 (Spouse, if filing)	
United States B	Bankruptcy Court for the: Eastern District of New York
Case number (if known)	

Check as directed in lines 17 and 21:				
	According to the calculations required by this Statement:			
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).			
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).			
	3. The commitment period is 3 years.			
	4. The commitment period is 5 years.			

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,200.00 0.00 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 3,400.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses Copy Net monthly income from rental or other real 3.400.00 here -> \$ 3.400.00 0.00 property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

					Column Debtor 1	-	Column B Debtor 2 non-filing	or	
7.	Intere	st, dividends, and royalties			\$	0.00	\$	0.00	
		ployment compensation			\$	0.00	\$	0.00	
		t enter the amount if you contend ocial Security Act. Instead, list it he		d was a benefit unde	er				
	For	you	\$	1,359.00					
		your spouse		0.00					
9.		on or retirement income. Do not tunder the Social Security Act.	include any amount rec	eived that was a	\$	756.00	\$	0.00	
10.	Do no receiv	ne from all other sources not lis t include any benefits received un ed as a victim of a war crime, a cr stic terrorism. If necessary, list oth elow.	der the Social Security Aime against humanity, o	Act or payments r international or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
		Total amounts from separate p	ages, if any.	-	- \$	0.00	\$	0.00	
11.		late your total average monthly column. Then add the total for Col			4,156.00	+ \$_	4,200.00	= \$	8,356.00
Part		Determine How to Measure Yo							al average nthly income
12.	Copy	your total average monthly inco	ome from line 11.					\$	8,356.00
13.	_	late the marital adjustment. Che ou are not married. Fill in 0 below							
	_	ou are not marned. Fill in o below ou are married and your spouse i		holow					
	_	, ,	,	below.					
	F	ou are married and your spouse if ill in the amount of the income list lependents, such as payment of th	ted in line 11, Column B,						
		Below, specify the basis for exclud							
		idjustments on a separate page.							
	I1	f this adjustment does not apply, e	enter 0 below.	\$					
				+\$					
		Total		\$_	0	.00 Co	ppy here=>		0.00
14.	Your	current monthly income. Subti	ract line 13 from line 12.					\$	8,356.00
15.	Calc	ulate your current monthly inco	me for the year. Follow	v these steps:					
	15a.	Copy line 14 here=>						\$	8,356.00
		Multiply line 15a by 12 (the num						x 1	12

Debtor 1 Charles McMichael

Debtor	1 <u>Cr</u>	naries McMichaei		Case number (if known)		
16.	Calcula	ate the median family income that applies to yo	u. Follow these steps:			
	16a. Fil	I in the state in which you live.	NY			
	16b. Fil	l in the number of people in your household.	2			
	To	I in the median family income for your state and size in the median family income for your state and size in the median income amounts, structions for this form. This list may also be availa	go online using the link		\$_	71,343.00
17.		the lines compare?	are at any banna aptoy of			
	17a.	☐ Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NC				
	17b.	■ Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 about 14 about 15 cm.	ation of Your Disposa			
Part	3: (Calculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)			
18.	Сору у	our total average monthly income from line 11	•		\$	8,356.00
	contend spouse	the marital adjustment if it applies. If you are not that calculating the commitment period under 11 is income, copy the amount from line 13.	U.S.C. § 1325(b)(4) allo			
	19a. If t	he marital adjustment does not apply, fill in 0 on lii	ne 19a.		-\$	0.00
	19b. S u	ubtract line 19a from line 18.			\$	8,356.00
20.	Calcula	ate your current monthly income for the year. F	Follow these steps:			
	20a. Co	ppy line 19b			\$_	8,356.00
	Мι	ultiply by 12 (the number of months in a year).			,	(12
	20b. Th	e result is your current monthly income for the year	ar for this part of the for	m	\$_	100,272.00
	20c. Co	ppy the median family income for your state and si	ze of household from lin	ne 16c	\$_	71,343.00
	21. Hc	ow do the lines compare?				
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court, o	on the top of page 1 of this form, ch	eck box 3, 7	The commitment
	•	Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise ordered b	by the court, on the top of page 1 of	this form, cl	heck box 4, The
Part	4:	Sign Below				
	By sign	ing here, under penalty of perjury I declare that the	e information on this sta	atement and in any attachments is t	rue and cor	rect.
Х	/s/ Ch	narles McMichael				
-	Charl	es McMichael				
	J	ture of Debtor 1				
		August 21, 2019 MM / DD / YYYY				
		hecked 17a, do NOT fill out or file Form 122C-2.				
	If you cl	hecked 17b, fill out Form 122C-2 and file it with thi	is form. On line 39 of th	at form, copy your current monthly	income fron	n line 14 above.

Fill in	this information to identify your case:		
Debtor			
Debtor	2		
(Spous	e, if filing)		
United	States Bankruptcy Court for the: Eastern District of New York	_	
Case r (if know	umber vn)	☐ Check if this is an amended filing	
	Form 122C-2 pter 13 Calculation of Your Disposable	Income	04/19
Γο fill o	out this form, you will need your completed copy of <i>Chapter 13 State tment Period</i> (Official Form 122C-1).	ement of Your Current Monthly Income and Calculation of	
space i	omplete and accurate as possible. If two married people are filing to s needed, attach a separate sheet to this form, Include the line num nal pages, write your name and case number (if known).		ore
Part 1	Calculate Your Deductions from Your Income		
the info	Internal Revenue Service (IRS) issues National and Local Standards questions in lines 6-15. To find the IRS standards, go online using the standard of the standards of the stan	he link specified in the separate instructions for this form. This	s
exp	enses if they are higher than the standards. Do not include any operating C-1, and do not deduct any amounts that you subtracted from your spous	expenses that you subtracted from income in lines 5 and 6 of Form	
If yo	ur expenses differ from month to month, enter the average expense.		
Note	e: Line numbers 1-4 are not used in this form. These numbers apply to inf	formation required by a similar form used in chapter 7 cases.	
5.	The number of people used in determining your deductions from in	ncome	
	Fill in the number of people who could be claimed as exemptions on you plus the number of any additional dependents whom you support. This rethe number of people in your household.		
Nati	onal Standards You must use the IRS National Standards to a	answer the questions in lines 6-7.	
6.	Food, clothing, and other items: Using the number of people you enter Standards, fill in the dollar amount for food, clothing, and other items.	ered in line 5 and the IRS National \$.00
7.	Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people is people who are 65 or olderbecause older people have a higher IRS all higher than this IRS amount, you may deduct the additional amount on the contract of the c	s split into two categoriespeople who are under 65 and lowance for health car costs. If your actual expenses are	

Official Form 122C-2

Debtor 1		naries McMichaei		_	,	Case number (if	known)	
Peop	ole w	vho are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	55					
	7b.	Number of people who are under 65	X	2					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	110.00		Copy here=	> \$	110.00	
D		who are 05							
Peop	oie w	vho are 65 years of age or older							
		Out-of-pocket health care allowance per person	\$	114					
	7e.	Number of people who are 65 or older	Х	0					
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=:	> \$	0.00	
	7g.	Total. Add line 7c and line 7f			\$1	110.00		Copy total here=>	\$110.00
				L					
		andards You must use the IRS Local Standards to		•					
		n information from the IRS, the U.S. Trustee Prog tcy purposes into two parts:	ıram has di	ivided th	e IRS Lo	cal Standar	d for	housing for	
H	ousi	ing and utilities - Insurance and operating expen	ses						
		ing and utilities - Mortgage or rent expenses							
sepa 8.	rate Hou	er the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also busing and utilities - Insurance and operating experted by a county for insurance the dollar amount listed for your county for insurance	e available enses: Usin	at the bag g the nun	ankruptc ober of pe	y clerk's off	ice.		pecified in the
		ising and utilities - Mortgage or rent expenses:		9				_	
	9a.	Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense		ar amour	ıt		\$	2,231.00	
	9b.	Total average monthly payment for all mortgages a	ınd other de	bts secur	ed by yo	ur home.			
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.							
		Name of the creditor	Aver paym	age mon nent	thly				
		Wells Fargo Hm Mortgag	\$	76	65.00				
		9b. Total average monthly paymer	nt \$	76	65.00	Copy here=>	-\$ _		Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.]			
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		mortgage)	\$	1,4	66.00 Copy here=>	\$1,466.00
	affe	ou claim that the U.S. Trustee Program's division cts the calculation of your monthly expenses, fill plain why:					is ind	correct and	\$

Debtor 1	Charles McMichael		Case number (if	known)		
11.	Local transportation expenses: Check the number of vehic	les for which you claim a	ın ownership	or operating	expense.	
	☐ 0. Go to line 14.					
	■ 1. Go to line 12.					
	☐ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards	and the number of vehic	les for which	n vou claim th	ie	
	operating expenses, fill in the Operating Costs that apply for					319.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b	. Average monthly payment for all debts secured by Vehicle 1.					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
			1		Panast this	
	Total Average Monthly Payment	\$	Copy here => -	. 0	Repeat this amount on line 33b.	
13c	Net Vehicle 1 ownership or lease expense		,		Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0,	, enter \$0	\$	0.00	Vehicle 1 expense here => \$	0.00
Vo	hicle 2 Describe Vehicle 2:]	
	. Ownership or leasing costs using IRS Local Standard		\$	0.00		
	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.		·			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
			Сору		Repeat this	
	Total average monthly payment	\$	here => -\$	0.00	amount on line	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0,	, enter \$0	\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v				the \$	0.00
15	Additional public transportation expense: If you claimed 1		•		· —	
10.	also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the app	propriate exp	pense, but yo	u may \$	0.00

Case number (if known)

Oth	er Necessary Expenses In addition to the expense do the following IRS categories		s listed above,	you are allowed your monthly expens	es for					
16.	Taxes: The total monthly amount that you will actually p self-employment taxes, social security taxes, and Medica your pay for these taxes. However, if you expect to receive and subtract that number from the total monthly amount	are taxes	s. You may included refund, you mu	ude the monthly amount withheld fron ust divide the expected refund by 12	า					
	Do not include real estate, sales, or use taxes.				\$	150.00				
17.	Involuntary deductions: The total monthly payroll deducontributions, union dues, and uniform costs.	ıctions th	at your job red	uires, such as retirement		0.00				
	Do not include amounts that are not required by your job	, such a	s voluntary 40°	(k) contributions or payroll savings.	\$	0.00				
18.	Life Insurance: The total monthly premiums that you patiling together, include payments that you make for your Do not include premiums for life insurance on your depet of life insurance other than term.	spouse's	s term life insur	ance.	n \$	0.00				
19.	Court-ordered payments: The total monthly amount the administrative agency, such as spousal or child support			by the order of a court or						
	Do not include payments on past due obligations for spo			ou will list these obligations in line 35.	\$	0.00				
20.	Education: The total monthly amount that you pay for e	ducation	that is either r	equired:						
as a condition for your job, or										
	■ for your physically or mentally challenged dependent	child if n	o public educa	ation is available for similar services.	\$	0.00				
21.	Childcare: The total monthly amount that you pay for ch Do not include payments for any elementary or seconda	tting, daycare, nursery, and preschoo	l. \$	0.00						
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care									
	that is required for the health and welfare of you or your by a health savings account. Include only the amount the									
	Payments for health insurance or health savings account				\$	0.00				
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.									
	Do not include payments for basic home telephone, inte expenses, such as those reported on line 5 of Official Fo				+\$	0.00				
	expenses, such as those reported on line 5 of Official Fe	1111 1220	7-1, or arry arric	dank you previously deducted.						
24.	Add all of the expenses allowed under the IRS expended lines 6 through 23.	nse allov	vances.		\$	4,089.00				
Add	itional Expense Deductions These are additional de Note: Do not include ar									
25.	Health insurance, disability insurance, and health sa insurance, disability insurance, and health savings according your dependents.									
	Health insurance	\$	0.00							
	Disability insurance	\$	0.00							
	Health savings account +	\$	0.00	1						
	Total	\$	0.00	Copy total here=>	\$	0.00				
	Do you actually spend this total amount?			J						
	☐ No. How much do you actually spend?									
	Yes	\$								
26.	Continued contributions to the care of household or continue to pay for the reasonable and necessary care a your household or member of your immediate family who	ınd supp	ort of an elderl	y, chronically ill, or disabled member o						
	include contributions to an account of a qualified ABLE p				\$	0.00				
27.	Protection against family violence. The reasonably ne safety of you and your family under the Family Violence									
	By law, the court must keep the nature of these expense	s confide	ential.		\$	0.00				

Debtor 1 Charles McMichael

	Charles McMichael	Case number (if known)			
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expenses or	n		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	costs that are more than the home energy costs included in expenses on largy costs	line		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.		\$	0.00
		dren who are younger than 18. The monthly expenses (not more than expendent children who are younger than 18 years old to attend a private of	or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after the date of adjustment.		\$	0.00
		the monthly amount by which your actual food and clothing expenses are gallowances in the IRS National Standards. That amount cannot be more is in the IRS National Standards.	:		
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in the form of cash or financia anization. 11 U.S.C. § 548(d)(3) and (4).	al		
	Do not include any amount more than 15%		\$	0.00	
	Add all of the additional expense deduct Add lines 25 through 31.	tions.	;	\$	0.00
Ded	uctions for Debt Payment		_		
le T	pans, and other secured debt, fill in lines	ent, add all amounts that are contractually due to each secured			
	realter in the 60 months after you me for ba				
	Mortgages on your home	initiapley. Then divide by 60.	A	verage :	monthly
220	Mortgages on your home		pa	verage ayment	
33a.	Copy line 9b here	=>	pa		
	Copy line 9b here Loans on your first two vehicles	=>	\$		765.00
33b.	Copy line 9b here Loans on your first two vehicles Copy line 13b here	⇒ ⇒	\$ \$		765.00
33b.	Copy line 9b here Loans on your first two vehicles Copy line 13b here	=>	\$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	⇒ ⇒ ⇒ ⇒	\$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	⇒ ⇒	\$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	=> Identify property that secures the debt Does payment include taxes	\$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	=> Identify property that secures the debt Does payment include taxes or insurance?	\$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes	\$ \$ \$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes No	\$ \$ \$ \$		765.00
3b. 3c. 3d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes	\$ \$ \$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes No	\$ \$ \$ \$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes No Yes	\$ \$ \$ \$ \$		765.00
33b. 33c. 33d.	Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance? No Yes No Yes No No	pa		765.00

ebtor 1	Cna	ries McMichaei			Cas	e number (if known)			
	•	debts that you listed in lin property necessary for yo		•	•	٠,				
	No.	Go to line 35.								
		State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ossession of your propert							
Nan	ne of the	creditor	Identify property that s	ecures the deb	t	Total cu	re amount		onthly o	ure
-NC	ONE-				\$			÷ 60 = \$		
								Сору		
					Total	\$	0.00	total here=>	\$	0.00
35. C	o vou d	owe any priority claims - s	uch as a priority tax, ch	nild support.	ا or alimony - th	at				
		due as of the filing date o								
		Go to line 36.								
	☐ Yes.	Fill in the total amount of a ongoing priority claims, sur	Ill of these priority claims	Do not includ	de current or					
		Total amount of all past-o				\$	0.00	÷ 60	\$	0.00
36. F	Projecte	d monthly Chapter 13 plar				\$		-	· —	
		multiplier for your district as						-		
		the United States Courts (four trive Office for United State)			ina) or by	X				
Т	o find a l	ist of district multipliers that inclunstructions for this form. This lis	udes your district, go online	using thé link sp						
		monthly administrative expe	•	. ,		\$		Copy tota		
,	worago	monany daminodadayo oxpo	3.100			Ψ				
37.	Add all	of the deductions for deb	t pavment.						\$	765.00
		es 33e through 36.							-	
Tota	I Deduc	tions from Income								
38. A	Add all d	of the allowed deductions.								
		ne 24, All of the expenses alle allowances	llowed under IRS	\$	4,089.00) _				
	Copy lir	ne 32, All of the additional ea	xpense deductions	\$	0.00	<u> </u>				
	Copy lir	ne 37, All of the deductions i	for debt payment	+\$	765.00					
	Total de	eductions		\$	4,854.00	Cop	y total here=>	•	\$	4,854.00
						- '				

	narles McMi	cnaei		Case	e num	ber (<i>if known</i>)		
art 2:	Determine You	ur Disposable Income Under 11 U.S.C. § 13:	25(b)	(2)				
		rent monthly income from line 14 of Form 1 Current Monthly Income and Calculation of					\$	8,356.00
childre disabili receive	en. The month lity payments f ed in accordar	bly necessary income you receive for supporting any child support payments, formor a dependent child, reported in Part I of Formore with applicable nonbankruptcy law to the ended for such child.	ter ca n 122	are payments, or 2C-1, that you	\$	0	.00	
employ in 11 U	41. Fill in all qualified retirement deductions. The monthly total of all a employer withheld from wages as contributions for qualified retiremer in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from respecified in 11 U.S.C. § 362(b)(19).			olans, as specified	\$	0	.00	
42. Total o	2. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). C			line 38 here=>	> \$	4,854	.00	
expens their ex	ses and you hax xpenses. You	ial circumstances. If special circumstances ju ave no reasonable alternative, describe the sp must give your case trustee a detailed explana- locumentation for the expenses.	ecial	circumstances and	d			
Describe f	the special ci	rcumstances		Amount of expe	nse			
			_ (\$		-		
			{	\$		-		
			{	\$		-		
		Total	\$	0.00	Co	py re=> \$	0.00	-
44. Total a	adjustments.	Add lines 40 through 43.		=> \$	S	4,854.00	Copy here=> -	\$4,854.00
	·	onthly disposable income under § 1325(b)(2). Ome or Expenses	Sub	tract line 44 from lii	ne 3	9.	\$_	3,502.00
46. Chang have c time you	ge in income of changed or are our case will be ed your petition	or expenses. If the income in Form 122C-1 or exirtually certain to change after the date you fe open, fill in the information below. For example, check 122C-1 in the first column, enter line in when the increase occurred, and fill in the a	iled y ole, if 2 in th	vour bankruptcy per the wages reporte he second column,	tition d inc	and during the creased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amount	of change
						□ Increase		

Case 1-19-45029-nhl Doc 1 Filed 08/21/19 Entered 08/21/19 15:32:23

Debtor 1	Charles McMichael	Case number (if known)	
Part 4:	Sign Below		
[By signing here, under penalty of perjury you declare that the	information on this statement and in any attachments is true and correct.	
X	/s/ Charles McMichael		
	Charles McMichael Signature of Debtor 1	_	
Date	August 21, 2019		
	MM / DD / YYYY		

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Charles McMichael		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR DI	EBTOR(S)	
c	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services re-	
	For legal services, I have agreed to accept		\$ <u></u>	5,000.00	
	Prior to the filing of this statement I have received			2,000.00	
	Balance Due			3,000.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are mem	bers and associates of	my law firm.
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				ıw firm. A
5. I	n return for the above-disclosed fee, I have agreed to reno	der legal service for all aspect	s of the bankruptcy	ease, including:	
b c	 Analysis of the debtor's financial situation, and renderi Preparation and filing of any petition, schedules, staten Representation of the debtor at the meeting of creditors [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and application 341 meeting. 	nent of affairs and plan which s and confirmation hearing, ar duce to market value; exe	may be required; and any adjourned hea	rings thereof;	iling of
5. E	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discipant any other adversary proceeding. These are at \$425.00 per hour. A per diem attorney rethan \$350.00 per appearance.	hargeability actions, judi nd other actions are inclu	cial lien avoidand Ided in more deta	I in the Retainer A	greement
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the de	ebtor(s) in
Αι	ugust 21, 2019	/s/ Hanin R. Shad	lood		
Da	nte	Hanin R. Shadoo Signature of Attorne			
		Aronow Law, PC	z y		
		20 Crossways Pa	rk Drive North		
		Suite 210 Woodbury, NY 11	1797		
		516-762-6700 Fa	x: 516-303-0066		
		Hanin.S@Aronov Name of law firm	vLaw.com		
		ivanie oj iaw jiim			

United States Bankruptcy Court Eastern District of New York

In re	Charles McMichael	Case No.		
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

516-762-6700 Fax: 516-303-0066

USBC-44 Rev. 9/17/98

Aronow Law, P.C. 20 Crossways Park Drive N Suite 210 Woodbury, NY 11797

Gross Polowy LLC 1775 Wehrle Drive suite 100 Buffalo, NY 14221

Loancare Servicing Ctr 3637 Sentara Way Virginia Beach, VA 23452

Wells Fargo Hm Mortgag Po Box 10335 Des Moines, IA 50306 Case 1-19-45029-nhl Doc 1 Filed 08/21/19 Entered 08/21/19 15:32:23

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Charles McMichael	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure lowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (I	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	7/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	7/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refe	r to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDUL SCHEDULE "A" OF RELATED CASE:	LE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	als who have had prior cases dismissed within the preceding 180 days may not uired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	ATTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New	York (Y/N):Y
CERTIFICATION (to be signed by pro se debtor/petition of period of period that the within bankrup as indicated elsewhere on this form.	oner or debtor/petitioner's attorney, as applicable): ptcy case is not related to any case now pending or pending at any time, except
/s/ Hanin R. Shadood	
Hanin R. Shadood 5489596 Signature of Debtor's Attorney Aronow Law, PC 20 Crossways Park Drive North	Signature of Pro Se Debtor/Petitioner
Suite 210 Woodbury, NY 11797 516-762-6700 Fax:516-303-0066	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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